

Victimisation and killing of older women: witchcraft in Magu district, Tanzania

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Abstract

This article is based on research carried out in four villages in Magu district, Tanzania to examine reasons for the killing of older women suspected of being witches. An aim of the research was to gain knowledge for the design of strategies to address the problem of the killings. It was found that people in Magu district face many new problems brought about by rapid modernisation. In desperation they seek answers from traditional healers, some of whom promote notions of witchcraft. This practice may ultimately lead to the killing of older women who are accused of being witches. To break out of this cycle, an approach is needed to deal with these problems.

Introduction

Magu district is in Mwanza region in northern Tanzania and lies on the southern shores of Lake Victoria. It is one of six districts in the region and has a population of 400 000, the majority of whom belong to the Sukuma tribe. Approximately 19 500 members of the regional population (4.9%) are 60 years and over and 55% are women (Wamara, 1997). Sukumaland (mainly Mwanza and Shinyanga regions) is notorious for being the area of Tanzania with the most serious problem of witchcraft-related killings. Statistics collected by the Tanzania Women's Media Association (Sheikh, 1999) on such killings in the region showed that in 1997, 93% of all killings of women had occurred in Sukumaland. Of a total of 194 women killed in 1997, 86 were killed in Mwanza region and 85 in neighbouring Shinyanga.

Magu Poverty Focus on Older People Rehabilitation Centre (MAPERECE) is a local NGO based in Magu town, which with the support of HelpAge International (HAI), works with and for the benefit of older people in the district. Its main objective is to promote community awareness of and care for older people. In 1993, MAPERECE carried out an informal survey in 13 villages to gain an overview of the situation of older people in the area. The findings showed that older persons are affected by a variety of problems, one of the most complex and disturbing of which is that of *uchawi*.¹ *Uchawi*, or witchcraft can lead to the isolation of older persons, particularly women, and in extreme but increasingly common instances, to murder.

In 1999, in conjunction with the work which MAPERECE had been doing over the years relating to the killing of older

women suspected of being witches, HAI undertook a study in Magu. The killings had been perceived as symptomatic of a more deep-rooted problem which needed to be fully understood before the problems could be addressed. Much groundwork had been done beforehand. In 1998, HAI had carried out a study on the situation of older people in Tanzania, which gave much relevant information about the general situation of older people in the Mwanza area (Forrester, 1998). However, although interviews with district officials during this 1998 study had yielded promises of data, no actual figures were produced, and a request to the police for information was turned down. Nevertheless, MAPERECE had information on killings in some of the villages. In one village, there had been five killings in the past three years, while it was estimated that 14 and 22 killings had occurred throughout the district in 1998 and 1997, respectively.

Research process

The 1999 HAI study was carried out in a participatory way by a research team which comprised 14 members, including HAI staff from various parts of Tanzania and MAPERECE staff from Magu. A criterion for the selection of local fieldworkers was that they should be from the Sukuma tribe, so that they could communicate directly with older persons who usually do not speak Swahili. The fieldworkers were divided into two teams and each team visited two villages for four days at a time. Four villages had already been selected by MAPERECE staff members, according to the following criteria:

- A high reported incidence of *uchawi*.
- Accessibility in rainy weather.
- An active MAPERECE committee in the village.
- A supportive village government.

Throughout the research process, a range of people were interviewed in an attempt to gain a balanced view of all the issues involved, particularly that of *uchawi*. The team members interviewed the following categories of individuals:

- Older persons – both men and women, and vulnerable older persons.
- Caregivers and the families of older persons.
- Younger persons.

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- MAPERECE committee members.
- Village government leaders and religious leaders.
- Traditional healers and birth attendants.
- Professionals – teachers, medical practitioners, etc.

Participatory-research methods were used, mainly group discussions and individual interviews, to gather information. These techniques worked well: the participants were free to talk about issues which they wanted to raise, while at the same time the techniques elicited information required by the research team. Group discussions were held for persons who were sufficiently mobile to meet at a central point, while home visits were made to older persons who were unable to come to a group meeting. Traditional healers were mainly visited at home, so that the researchers could observe and talk to the healers in their own environment. Group and individual interviews were held with key informants to throw more light on information received from the older participants, and for the informants to make suggestions as to how problems affecting older people in the area might be resolved.

At the beginning of the study, the research team members were unsure whether individuals would be willing to talk about *uchawi*. As it turned out, many did talk about it – some very openly, others more guardedly or allusively. In some groups, every topic that arose led to discussion on *uchawi*: from health to traditional healers to *uchawi*; or from family to older widows to *uchawi*. Other individuals used a variety of tactics to avoid the issue. Some denied that *uchawi* exists at all; some alluded to it but stated that they were not prepared to talk about it. In several groups, participants seemed ready to talk about it but were silenced by others. In another group, whenever a sensitive topic was raised, the majority of the participants (mainly older women) left the group and only returned when they felt that the “danger” had passed. The research team members perceived that on occasions some participants in a group discussion were afraid to speak openly for fear that what they said might be repeated in the village and people would be angry with them. They might also have been at risk of accusations of witchcraft being made against them, while others may have been afraid that if they spoke about specific incidents, they might be directly asked who the *mchawi* was.

The technique of role play was employed in an attempt to coax participants to present their experience of a sensitive and distressing practice in an indirect way. However, in the end a sufficient number of individuals were willing to talk about *uchawi* and the use of role play became a catalyst to stimulate discussion instead. In two villages, local people organised role plays with dramatic results; the play was impressive in its inventiveness. In one village, role play brought the problem of *uchawi* into the open and was a base for lively and frank discussion. It was admitted that *uchawi* is a major problem in that village and the villagers explored ways to tackle the problem.

Towards the end of the data collection in each village, a short presentation was given to the villagers, who had an opportunity to comment on the study findings. At the end of the research, a more comprehensive presentation, which included role play by inhabitants of one of the villages, was given at the district level to district officials.

Findings

Family support and basic needs

In the past, older persons in Africa lived within an extended family system. This system ensured that they were supported as their strength decreased and that there would be numerous

family members to take over the more arduous household tasks, such as fetching water, gathering firewood and cultivating crops. If the older members fell ill, there would always be someone to look after them. Nowadays many older Africans report that their adult children have left the villages because of economic pressures: land is becoming scarcer, and in the new economic climate of cost sharing in Tanzania, it is more difficult to earn enough income through agriculture to pay for school fees and medical treatment than through work in the cities. Now, older members of a family tend to remain in the village and often end up living alone. The problem of living alone afflicts women far more than men, partly because women tend to live longer than men and are thus left as widows, but also because if men are widowed, they are likely to remarry and will choose a younger woman who will take care of him. The option of remarriage is seldom open to older women.

The study found that many older women live alone, in isolation, and struggle to meet their basic needs. Water was cited as a serious problem, since they must often walk long distances to collect water and as a result of droughts in recent years, many water sources have dried up. A similar problem applies to firewood, where supplies are receding further away as forests are depleted by overcutting. Older women may resort to using alternative types of fuel to firewood, such as cow dung or rice chaff. Even if water and firewood are available, older persons complain that they can no longer cultivate a large enough area to feed themselves. A lack of food security is further compounded by erratic rainfall patterns and drought conditions. Many older persons were found to live in dilapidated houses, which they say they are unable to rebuild without assistance.

There are also other repercussions to living alone for an older woman. If she is frail as a result of poor nutrition and/or illness, she may not have the strength to leave her house much and an air of mystery may grow around her, which may strongly contribute to accusations of her being an *mchawi*. The poor conditions in which she lives and the smoky fuel with which she cooks help to cause twisted limbs and gnarled hands, wrinkles and red eyes – unmistakable signs within this culture of being an *mchawi*. In addition, the dilapidated state of her house makes her an easy target for break-ins and attacks on suspicion that she is an *mchawi*. Since she lives alone, she has no support to ward off the accusations and no resources to fight off attacks.

Health

Health is a key area of concern for older persons. Difficulties in meeting basic needs and a decreased level of family support negatively affect their health. At the same time, access to health care becomes increasingly problematic as one grows older. In Africa, unfamiliar diseases are afflicting the young and the old alike. Older participants in the study explained that they often choose to consult a local traditional healer rather than to attend a government dispensary. Dispensaries are often located a long distance from where older persons live, they are expensive, and the service provided at the dispensaries is poor since the staff are perceived to discriminate against older persons in favour of younger patients. For older persons, traditional healers are more accessible and familiar, and they perceptibly treat older clients with greater respect than do orthodox health professionals. Besides, the traditional healers speak Sukuma and have negotiable fees which may be paid in kind. In addition, some older persons prefer to consult a traditional healer because they believe that part of their illness is connected to *uchawi*.

The position of older women in society

The study population is a patriarchal society where the status of women is very low, and women's roles in both community and family are prescribed and limited by men. Older Tanzanian women face a double discrimination because of gender and age. Although in the past they had important roles in the community, in recent years these roles have begun to change. Many older women are still traditional birth attendants, but in the past they were also guardians of traditional practices and advisors to adolescent girls. These days, traditional roles are being diminished through an erosion of customs and beliefs. Older women perceive that they are now viewed in a different light. Rather than being sought out for advice, the respect which they once commanded has been undermined by their destitution and struggle for day-to-day survival – which women shoulder a greater proportion of than men. Younger persons find the village context irrelevant to their aspirations and feel that they know more about the modern world than their grandmothers. They may even regard their elders with scorn. These changes in attitude and loss of respect shown to older persons are contributory factors to the fact that older women may be killed with such impunity. In Tanzania, women do not have a voice and by Sukuma custom are expected not to talk in front of men in public, which means that if they are accused of *uchawi*, they are unable to demand an explanation, or to stand up and defend themselves.

Traditions, customs and beliefs

Traditions and customs of the Sukuma tribe are nevertheless still deeply rooted, particularly amongst older people. They erect "homes" for their ancestral spirits, perform rites to bring rain and wear beads to keep them from harm. Inheritance laws are also dictated by Sukuma custom. When a father dies, his property is left to his wife – or wives, who will pass it on to their sons when the women die. This system supposedly guarantees that a widowed mother has a safe place in which to live out her days.

Older people complain that younger people no longer adhere to many of the old customs. On the other hand younger people say that an adherence to old beliefs is what is tearing the community apart in the form of *uchawi*. Why else, the younger people ask, are older people being hacked to death with machetes if it is not because of traditional beliefs? It would seem that traditions such as building homes for spirits and performing rain-making rituals, and the traditional ways in which community life was led are all fading away as modernisation spreads to the villages from the towns. On the other hand a belief in *uchawi* appears to be as strong and as pervasive as it ever was and to not only be confined to the older generation. However, there is now an element of killing suspected *wachawi*, which was never part of the old tradition. All of these changes suggest that there is more to *uchawi* than a simple belief in Sukuma traditions, and that the picture is more complex than it seems.

Uchawi

Uchawi is a belief held by numerous persons in rural areas of Tanzania, whether these persons are educated or not, rich or poor, young or old, or members of a modern religion or not. Residents of the study area claim that *uchawi* originally entered Sukumaland at the beginning of the 20th century when tribes migrated north from Singida. It was at this time that the *wapiga ramli* arrived and began to deport suspected *wachawi* from communities to prevent them from causing further trouble. It was only after villagisation in the 1970s, when moving individuals out of the villages was no longer an option, that people began to explore an alternative way of ridding their

communities of *wachawi* – by killing them. Although a rare occurrence in that decade, the practice of killing *wachawi* began to gain momentum in the 1980s; at the turn of the century it has become a serious problem.

A fundamental problem leading to an accusation of *uchawi* seems to be individuals' strong belief that whatever ill befalls them or their community is an enactment of a Swahili saying: *Kuna mkono wa mtu* (the hand of an *mchawi* is involved). If someone dies of typhoid, it is not because that person drank contaminated water, but *kuna mkono wa mtu*. Because of this belief, a first step which villagers will take if an ill has befallen them is to consult an *mpiga ramli*, to find out who caused the ill. Invariably, individuals who are alleged to have caused these tragedies are weak and vulnerable older women, who often are related to the afflicted family.

The *wapiga ramli* appear to have a pivotal role in the recent proliferation of *uchawi* killings. It is said that they have traded their previous, genuine role of identifying a few harmful *wachawi* for a place in the world of business. Customers approach them to identify who is responsible for the misfortunes which they are suffering. If they do not provide a convincing answer, the customers will consult another *mpiga ramli*. As a result, *wapiga ramli* create a network of contacts to keep them informed of all local disputes, so that if they are consulted, they can point a finger at someone whose accusation will satisfy the customer. Customers are willing to pay well to have their problems solved.

Another important group involved in the killings are gangs of thugs who carry out the killings. It is rare that family members will dirty their hands at killing a relative. They too have their contacts in the villages, who keep track of family disputes and charge a steep fee for their services. These gangs of youths are a contemporary phenomenon, and it is said that their behaviour is linked to a recent trend of youths not wanting to work hard in the fields for a living. The price for killing an *mchawi* is TSh50 000 (US\$62.50) – a sum of money which would be difficult to make through the cultivation of crops. However, more valid contributory factors to the emergence of these gangs of thugs may be the rise in rural unemployment and land scarcity – which means that many young persons do not have a field to cultivate, and the influences of the modern world which pressure some young individuals into adopting a life-style which would be beyond the reach of an average village boy.

However, perhaps a main point to emerge from the study is that there is often an underlying cause for the killing of older women and that *uchawi* is merely used as a smokescreen behind which the cause is hidden. A main reason for wanting an older woman dead is likely to be connected to the local traditions of inheritance (whereby the property of a dead husband first goes to his wife and only when she dies is it passed on to her sons). In times of increasing land scarcity, a son and his family may view the only way in which they can survive is by somehow acquiring the plot of land which his mother cultivates. Other family members may want the house in which the mother lives, or the property in the house which she has inherited. Other reasons include grudges, settling old scores, conflict between wives in a polygamous household, and resentment on the part of a daughter-in-law against a mother-in-law whom she sees as nothing but a burden straining already tight resources. An easy solution to these problems would be to have the mother accused of *uchawi* and the process of driving her away or killing her would then be a quite simple one.

Wachawi may also be used as scapegoats on which to pin the ills of the community. Rapid social change is taking place in Tanzania and people may suddenly find that the norms

with which they grew up are no longer relevant to modern life. A perceived increase in unexplainable diseases and deaths also disturbs the community. Whether the increase is connected to a deterioration of health facilities, the destruction of the environment – such as dirty water, or to the spread of HIV/AIDS – which causes children and previously healthy young adults to die for no apparent reason: the easiest course of action is to blame the ills on something intangible, such as *uchawi*, which is manifested in the form of a defenceless old woman.

The role of village institutions in uchawi

Although the role of village governments is to guarantee peace and security, the study found that the governments were passive as far as *uchawi* is concerned. Communities take issue with village governments and accuse them of turning a blind eye to *uchawi* killings, hence encouraging the practice. The increasing prevalence and acceptance of bribery within the governments was also identified as playing a role in fuelling the killings.

Church leaders interviewed about *uchawi* were unanimous in their condemnation of a social evil which is tearing families and communities apart. Many of these persons interviewed claimed that the influence of the church has diminished the belief in *uchawi*. However, the church seems to have an ambivalent attitude towards the problem and accommodates *uchawi* rather than denies its existence. A church minister (whom the researchers met at the home of a traditional healer, where he was undergoing treatment for a spell which he alleged had been cast upon him) explained: "Christianity and *uchawi* co-exist. The forces of *uchawi* are just waiting to claim anyone who wavers from the true path."

Conclusions

The phenomenon of the killing of older women is linked to social change in Tanzania in the past decade or so. The economy has changed beyond recognition, with market forces in place and people struggling to find a way to earn a living. It is only natural that *wapiga ramli* should see a market opportunity and exploit it, and that gangs of youths should do likewise. What is unfortunate is that the consequences are so grim for some unfortunate older women.

A multi-pronged approach is required to deal with the complex problem of witchcraft-related killings. Residents of Magu are faced with a range of social, health and environmental problems, such as a lack of water, disease, poor housing and hunger. Being unable to cope, the community consults traditional healers, who inform the community of the identity of the *mchawi*. The alleged *mchawi* will be killed or maimed in the hope that the ills of the community will disappear, but the residents will be disappointed when the problems persist. Since the problem seems to be based on a market demand, what needs to be tackled is the market, which thrives on the beliefs of the community. This is a long-term solution, which will involve education and awareness raising, until individuals no longer rely on *wapiga ramli* to solve their problems and to assuage their grief. In addition, education is needed in the field of health, so that people may recognise the physiological symptoms of diseases, such as AIDS, rather than assuming that everything is caused by *uchawi*.

The programme

The study resulted in an intervention programme, the Sukumaland Older Women's Programme, which aims to develop strategies to establish sustainable structures to protect older women in the area. The programme also seeks to reduce the incidence of witchcraft allegations which lead to violence, and to care for victims and other vulnerable older women and men. The project is being implemented in Magu district and Shinyanga. Under the programme, local partners challenge the community to address the causes and effects of practices which affect the lives of older women. It therefore seeks to improve the quality of life of older people and in general to place older women in particular at the forefront by introducing positive changes to benefit all. In recent years HAI has made gender a priority action area, and the project is at the forefront as this strategy is translated into action and will provide practical experience from which the organisation will develop future programmes.

Four action areas have been designated for the improvement of the status and security of older people, to bring about permanent change in the communities in which they live. The action areas are:

- Challenging harmful beliefs and practices which lead women to be intimidated, and training older women as paralegals to help their peers to understand and access their rights.
- Improving livelihood and physical security through training and intervention in the areas of agriculture, nutrition, housing and income generation.
- Improving older women's access to social services.
- Strengthening organisations of older people to provide care for and to speak out on behalf of victims.

A primary concern of HelpAge International and MAPERECE is to address the causes, symptoms and effects of witchcraft allegations in areas where these lead to victimisation and even killings of older women. Since the programme challenges the beliefs of the community, a cautious approach is being taken to build up the trust of the people involved and to break down prejudices in a way that will not alienate people from the programme.

Note

1. Several Swahili words are used throughout this paper, since the nearest English word may carry the wrong connotation – as is the case with words for "witchcraft," itself an unsatisfactory word. *Mchawi* pl. *wachawi* – a witch or sorcerer – refers to both male and female. *Uchawi* – witchcraft or sorcery. *Mpiga ramli* pl. *wapiga ramli* – diviner, "witch-doctor." (Culturally unsound though the word has become, witchdoctor, seems to be the nearest equivalent to the Swahili word.)

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